



State of Washington

Application for a Water Right

For Ecology Use

Fee Paid _____

Date _____

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name OCEAN PARK WATER COMPANY, INC. Home Tel: (____) _____ - _____
Mailing Address P.O. Box 618 Work Tel: (360) 665 - 4144
City OCEAN PARK State WA Zip+4 98 + _____ FAX: (360) 665 - 4661

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name THOMAS J. FRARE Home Tel: (360) 459 - 3159
Mailing Address 3227 74th AVENUE S.E. Work Tel: (360) 459 - 3159
City OLYMPIA State WA Zip+4 98501 + _____ FAX: (____) _____ - _____
Relationship to applicant ENGINEER

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 65 (☒ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of Domestic/Community Water System. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. SERVICE AREA

Estimate a maximum annual quantity to be used in acre-foot per year: 80

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From ____/____/____ to ____/____/____

*area served by
Ocean Park water co.*

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for <u>4</u> well(s). <u>Addition volume from wells 1, 2, 7, 8 under permit #G2-00759C</u>		
Number of diversions: _____								
Source flows into (name of body of water):						Size & depth of well(s): <u>#1 - 8" - 102'</u> , <u>#2 - 6" - 122'</u> , <u>#7 - 6" - 120'</u> , <u>#8 - 8" - 116'</u>		
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>on file shown on G2-00759C</u> <u>8) 345' E + 325' N of the center of 28</u> <u>1+2) 830' E + 315' N of the center sec 28</u> <u>7) 534' E + 295' N of the center sec 28</u>								
1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SW</u>	<u>NE</u>	<u>28</u>	<u>12</u>	<u>11 W</u>	<u>PACIFIC</u>			
For Ecology Use Date Received: <u>3-10-2000</u> Priority Date: <u>3-10-2000</u>								
SEPA: <u>Exempt/Not Exempt</u> FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete <u>3/29/00</u> By <u>ec</u> Date Returned _____ By _____ WRIA: <u>24</u>								

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: Ocean Park Water Company
- B. Briefly describe your proposed water system. (See instructions.)
The system currently has 8 wells which pump to storage and is in turn repumped to the system. Water rights exist for 535 GPM and maximum annual of 448 acre-feet primary right.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO
PROVIDE DOCUMENTATION. G2-00759C, G2-21399C, G2-25737C, G2-27073C

Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: AS PER WATER SYSTEM PLAN Type of connection MIXED
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☒ YES ☐ NO
If yes, when was it approved? Pending Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☒ YES ☐ NO
If yes, when was it approved? Pending Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
Use _____ Acres _____
Use _____ Acres _____
Use _____ Acres _____
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no.: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal Type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

3 concrete above ground reservoirs for a total of 537,000 gallons ☒ YES ☐ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Existing well field. From SR103 & Bay Avenue in Ocean Park proceed north on Vernon Ave. about 1/2 mile; turn right on 270th for 1/4 mile; turn left of "U" St. one block; turn right on 272nd to wellfield on right.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

on file with water right G2-00759 C

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):


Water Service Area

B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.


Applicant (or authorized representative)

3-06-00
Date

Same Service Area
Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation: 	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).